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ABSTRACT

An effectively functioning family is one in which each member is able to exchange opinions; affection, views and information. The member learns in the family to relate with ease to others and to accept himself. Family group consultation is a means of helping families to become effective as the members relate better to each other. Other approaches to family counseling do not meet this criterion because they emphasize division of the family or ignore the importance of actual family interaction. The specific course of family group consultation as it ranges from information gathering to commitment and interaction of group members on suggested changes in behavior patterns is described. The final session of a group is used for summarizing the consultation process after eight or twelve weeks of meetings. A research test in 1965 on this family counseling method did not show statistically significant changes occurring among the participants. There is other evidence that changes in family functioning do occur and that the method meets a distinct need of many families. Further evaluation of family group consultation is suggested. (NS)

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THE FAMILY: LABORATORY FOR HUMAN BEHAVIOR

by Grace Irish

Much is written about the family. Some of what is written is pessimistic. More than one writer has questioned the capacity of the family to live up to its task in the increasing complexity of this age. Others have been less pessimistic about the survival of the family while perhaps being more concerned with the survival of man. Margaret Mead has said that no civilization has survived long the extinction of the family unit. It is likely that the family unit will be modified by pressures exerted upon it by rapid societal change but it seems likely also that its function will remain the same. The function of the family, according to Mead, is to rear children so that they can learn how to relate themselves to others, to work and play, to make friends, and to marry and rear children.

The family is the place where the child learns who he is, what he is, and what he may become. The family may need help in this function. Other institutions such as the school are involved. Both are socializing agencies and as such contribute to the socializing of youngsters. But it is in the family that the youngster learns first. It is with people, significant to him, that the child learns what it is to be a person. To get an idea of the task before it one needs to hypothesize an effectively functioning family.

What is an effectively functioning family? There has been relatively little research done on the family until recent years. Of the research done there is even less which is helpful in describing a healthy, fully functioning family. It is necessary, therefore, to make some assumptions about the way in which an effective family might operate.

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I. CHARACTERISTICS OF AN EFFECTIVELY FUNCTIONING FAMILY

It appears that a healthy family would be one in which (among other things) information, views, opinions, affection and positive regard are exchanged among its members. Another way of saying this would be that the individual family member, as well as any optimally functioning individual, is a person who is free to express affect, who is able to function with an awareness of others, who is able to feel close to others, who is able to demonstrate affection, and who is optimistic in anticipation of outcomes. Such a person would be expected to relate with ease to other persons, and he would appear to be on good terms with himself. He would be expected to express feeling directly but with recognition and acceptance of the feeling of the recipient of his expression. He would be receptive to overtures made by another. He would be as willing to be helped as to help. He would act as though the tasks with which he is confronted are challenges and would attack them in the spirit of a game. He would display these characteristics in the family where he has learned them by example and by practice.

Such a movement, illustrative of an effectively operating family, would be expected to be exemplified in an interchange of cultural outlooks. Alternate ways of working out conflicts between parents and adolescents would be discovered by families who participate. This would be in contrast to the limited approaches of a family, a family which has "tried everything." Adolescents may be expected to relate in more positive ways to other adolescents, to listen and to talk with less stress.

Demonstration of affection and positive regard would be seen in a person's willingness to reveal himself to others in the group, and such revelation would be accepted by

the group. The effect of this exchange would free all involved to act more spontaneously, with less constraint--to be genuine.

A person who feels free to express affect might be expected to make such statements as "I can generally express my feelings (joy, sorrow, pleasure, pain, etc.)." Or he might say, "I feel better when I have talked about my concerns with someone." Such a person might give voice to his awareness of self and others, especially his readiness to relate to others, by saying something like, "I have several close friends," or "I like to be with my family," or "I enjoy being with most people." He would appear to be on good terms with himself and this state might be revealed through such statements as "I usually feel well," and "I think of myself as a happy person," or "I usually feel confident of the decisions I make." A person who is optimistic probably would say, "Most of the things I plan work out well," or "I like things to happen as I plan them, but I don't get terribly upset if they don't," or "I am a good manager (of money, time, work, etc.)." He would be able to ask for help quite directly as, for example, "I don't know exactly what is expected of me in some situations. Will you tell me what you would do?" And he would be able to respond positively to a similar request made of him. He would give expression to his willingness to face tasks as challenges by communicating, "I have no trouble making decisions," or "I like making plans or working out problems. They seem like contests to me." He might also say, "I am curious to know how others solve problems. I think it is fun to know different ways of doing things." He might communicate his willingness to reveal himself by such a statement as "There aren't many things I mind talking about," or, more positively, "I'm willing to talk about almost anything with my family or close friends."

II. METHODS OF COUNSELING WITH FAMILIES

Family group consultation is perceived as a method of working with families which will allow their members to become more fully, more effectively functioning. It is defined as a form of counseling in which families meet together for the purpose of consulting with one another and with a professional counseling staff. In the school setting family group consultation could put teeth in the cliche "understanding individual pupils" because children are seen in the live arena of family interaction.

The approaches which have been used to work out the problem of family imbalance, ineffectiveness, defeating behavior, or dysfunction, have some variation. The methods being used all contribute some information from which inferences may be drawn and added to the fund of knowledge. It is suggested, however, that each of these methods requires a differing degree of involvement on the part of the counselor as well as the family members; the degree of involvement may affect the process--the counseling venture.

Furthermore, successful counseling sessions may be those which make it possible for family members to relate more effectively with others in the family. Family members may be enabled to generalize this behavior to other people in other situations.

Some of the methods which are currently in use may minimize, in part, the social process and, as such, may defeat the goal of counseling. Jackson and Satir (1961) enumerated six approaches which are used in working with families. (1) The family members are seen conjointly which means that all family members are seen by the same counselor at the same time. This method allows the family members involved a means of communicating intimately while the communication is being observed and interpreted by the

counselor. The limitation which seems inherent in this method is in the possibility that the complexity and amount of interaction and interpersonal dynamics may be more than one counselor can handle successfully; a consequence of this may be that the counselor may become part of the problem, in effect, another participant in the family difficulty.

(2) The whole family is seen conjointly for diagnostic purposes and its members are then assigned to individual counselors who work collaboratively. This method appears to work against the major premise of family therapy. It is in the family that we learn to relate to others, to find out identity, and to practice ways of behaving. To assign family members to individual counselors is to give them practice in relating to counselors, not to their own family with whom they live. For the counselors, "to collaborate" becomes an academic exercise in which they attempt to piece together what they have separately learned.

A variation of seeing the family conjointly for diagnostic purposes and then separately for treatment by different counselors, is to select one member for individual counseling after a family diagnosis has been made. This method seems equally questionable. To separate a person from the family suggests that one person alone is having difficulty and that he is unaffected by the other family members and that he does not affect them. Spiegel and Bell (1959) have suggested at least one way in which a family member may be used in maintaining some kind of equilibrium in the family in their discussion of the scapegoating concept. Using this concept as an example, if an individual in a family were used as a scapegoat, that is, as a target or vehicle through which the destructive feelings of the family members were expressed, it is entirely possible that counseling

a person, as identified as the one with a problem would only further the process of scapegoating. If another person in the family were taken into counseling the scapegoating process might only be shifted from one to the other; the interaction of the family would be interrupted but little.

(3) A single counselor works with family members individually and pieces together what he knows of the interaction as described by the family members. Again, this method seems to be an academic exercise for the counselor who tried to fit together the views according to individual members of what goes on in the family. The purpose of counseling seems ignored: to help people live more effectively.

A variation on this method is to assign individual family members to different counselors at the beginning. These counselors then pool their findings and proceed with individual treatment. "The family interaction is observed primarily at the level of collaboration" (Jackson and Satir, 1961, p. 29). The same weakness appears to hold for this variation. It seems to be academic and a fiction of a family.

(4) Another approach is to see the identified subject regularly and the family members occasionally. This approach serves to emphasize the division in the family between the troubled and the well. This method is seen to be destructive in consequence, if not intent. To label and thus identify one as "sick" is to set him apart, to isolate him,and thus to reduce the feedback he might get which would allow him to modify his behavior and to make it more acceptable to those around him. Moreover, this method suggests that there is something communicable about emotional "sickness" which will be minimized by isolation. It seems possible that "wellness" may be communicated, too, if the focus is the family as the patient, rather than an individual.

(5) Another method used and described by MacGregor, et al. (1965), is interdisciplinary in the selection of its counselors. One family is seen in a group initially, and then the family members are seen individually by each of the various members of the "multiple impact therapy" team. At the end of two full days the team and family members gather in a group again for a summary. The strength of this approach is that it uses the human resources of an interdisciplinary "team which serves as a model of healthy group functioning." A question may be provoked in regard to the small amount of time and intensive activity directed toward behavior change. Is a person likely to maintain the change suggested over time? MacGregor's follow-up after six months indicates the majority of his subjects was able to maintain the change.

(6) Still another approach, reported by Curry (1965) is to bring together several family units into a large group where the members of the several families examine together their ways of functioning. Curry himself has expressed the limitations and the advantaged inherent in this method: "That the depth of this form of therapy can reach is limited is immediately admitted; it does, however, offer family units an opportunity to examine their way of functioning in a meaningful way with the support and help of a therapist." (Curry, 1965, p. 95).

The approaches described above all take as their starting point, the family. Each method is a variation on the theme of concern for the family as a unit. It is the goal of those involved in the study of families to help the malfunctioning family to find more effective, less defeating ways of behaving. As has been indicated in the brief comments of each method it appears that, in some cases, the method may become part of the difficulty rather than an interruption of the difficulty.

III. THE COURSE OF FAMILY GROUP COUNSELING

The course of a family's participation in the group can be described as follows. The first session is spent in the family's supplying information of two kinds: factual information (ages, occupations, interests, etc.) and interpretive information (descriptions of events which have occurred in the family). Information gathering usually occupies much of the first session. Additional information is gathered in subsequent sessions but with less emphasis on the factual and more on the interpretive. Family members are asked to respond to the question, "What are the issues before this family?" Each person is asked, "How do you see yourself in the family? What is your role? Do you see yourself as important to the family?"

Everyone in the family is asked to come to family group consultation but the attitude taken is that the counselors will work with those who do come with the hope that the other(s) will come later. The counselor makes a note of how many of the nuclear family are present, what the relationship appears to be between father and mother, between parents and siblings, between siblings, and possible variations of these. He hypothesizes that a particular member controls the rest of the family. He makes an observation to himself as to the kind of involvement each person demonstrates. Does he involve himself verbally? Do non-contextual clues (facial expression, body posture, physical activity or lack of physical activity, etc.) provide one with the feeling that the person is involved even though he contributes little verbally? The counselor comments on what he observes.

The second hour the parents discuss difficulties which may exist between themselves while the children may feel freer to discuss their concerns without the parent present. Also,

if there are very small children present the second hour allows them more physical freedom and yet it provides the counselor the opportunity to observe the children as they relate to each other.

The second session, a week later, may be begun with a question to start things by the counselor such as, "Well, how has it been going?" Some such brief lead is used to allow the family members to determine the subject. At this stage the response is likely to be rather superficial and factual such as, "We went out to dinner last night." The counselor uses this as a lead into something which may be more productive such as an interpretation of what happened while the family was eating, what went on between them, and how they felt about the experience.

> As he listens, the counselor makes careful note of the following factors in an event: (1) time, (2) place, (3) significant persons taking part in the event, and (4) the reporting individual's perception of what happened. It should be noted that he keeps track of <u>each participant's</u> account of an event. He checks the description of the event over and over as each person describes it. Out of all these data, clear patterns begin to emerge. (Bernard and Fullmer, 1964).

The counselors begin to get a notion of what the loyalties are, the alliances, and the contracts which may exist in the family and he uses these notions to check out with the members what they really are. In a family, for example, where the mother appeared to try to meet her son on his terms in exchange for his loyalty, it seemed pertinent for the counselor to reflect that she might have disqualified herself as mother when she attempted this bargain. The likely pain and anxiety engendered by such a reflection may result in some such client rejoinder as, "What would you do?" or "Tell me what I should do" to which the counselor

avoids responding directly. In an effort to keep theresponsibility where he believes it belongs, with the owner of the behavior, he would respond by saying something like, "let's talk about the alternatives available to you. What do you think you could do? How do you think a mother should act?" Should the person be unable to respond, the questions are directed to the group.

The session is used to give the members of the families further practice in reporting events. Up until this time reporting events with reference to other persons has been accepted. At this point, however, the group members are asked to use the pronoun "I" rather than "he" or "she" as an event is recounted. The focus is on the person who is telling of the event and he is encouraged to "own" his perception of the event by using "I" in the telling. Descriptions of the same event by other family members permits the counselors to hypothesize a pattern of behavior in the family.

The individual at this stage is expected to begin some evaluations of his own behavior and may be heard to say, "I didn't realize I felt that way," or "That's a new thought to me."

It is intended that by the third session individuals become aware that other families have problems and discussion seems to become more open. A remark such as "My daughter is that way, too, but I'm not worried about it" may be accepted as supportive. As confidence is gained individual group members become less the outsiders and more the helping persons. Suggestions or solutions are proffered by members of the group.

It is intended that by the fourth session the members of the group will have manifested commitment to consultation. The most obvious demonstration of commitment is the attendance at the sessions of the individual members. However, other forces may be at work with result

in the attendance of some members. For example, coercion may be used by parents to get youngsters to attend or a reluctant spouse may be pressured into presenting himself to and in the group. If such possibilities suggest themselves to the counselors, they should confront the person with his seeming behavior. A question may be put, such as, "Why do you come here?" or "For whom do you come here?"

There is another way to gauge the commitment of family members. Since the first session the counselors have been asking the individual in the group to describe events and problem situations as they happened. By the fourth session the counselors have had some direct experience of events as they happen in the group. This, combined with the description of events by the various members, should supply them with some information by which they can make some judgment of the commitment of the family members. The counselors ask themselves how well the descriptions offered by the individuals conform to what they, the counselors, observe happening. On the basis of this kind of comparison, the counselor reflects what he sees, consistency or discrepancy, and asks the person to react to his reflection. If there seems to be a discrepancy the individual is helped to look at his input to a situation, and the inputs of others involved to the situation. He is encouraged to focus on himself in relation to his problems. His willingness to do this may be a gauge of his commitment.

Lack of commitment to consultation from each member may be characterized by a tendency of the group to "wander" through the session, never focusing for long on any issue. If "wandering" in this sense is observed a question should be aroused in the counselors as to the commitment of each person. An observation of such "wandering" should be made to those involved. Some statement such as "We don't seem to be able to stay with one subject very long today. I wonder what is going on ," might be used at this point. If

the counselors feel there is a serious lack of commitment demonstrated this should be made known to the group because it is felt that movement is questionable under these circumstances. Furthermore, bringing attention to the situation as seen by the counselors may provide the impetus for concerted movement.

By the time of the fifth session some members of the group will be observed using the counseling skills they have learned. They will be heard to ask others to be more specific in reporting incidents that have happened outside the group. In trying to get a clearer picture of what happened they might say, "I don't think I understand what you are saying. What I thought you said was. . . Can you straighten me out?"

They will be asking one another to look at his own behavior, pointing out the difference between saying "You upset me" and saying "I'm feeling upset and it seems to be related to you. I wonder what is bothering me." He is being asked to look at his own behavior instead of focusing on the behavior of another in the situation.

The counselors encourage the group to pursue the meaning of the communication between the sender and receiver. The attempt is made to clarify the meaning of a signal sending and reception. A group member is asked about his verbal and non-verbal behavior as it affects others. Specific incidents, occurring in the group, are used to confront a person with what he does, and what it seems to do to others. The purpose of this is to sharpen his awareness and perceptions of events which involve him.

Sessions from the fifth one on are a reiteration of what has gone before. Information-gathering continues but is at an incidental level. Identification of issues before the individual families continues. The issues may appear to change as counseling proceeds but

the process of identifying them remains the same. The degree of commitment of each person is estimated and commented on if it seems appropriate and serves the purpose of being a reinforcement. Events within the respective families are described by each individual involved. Patterns as they emerge from this process are checked out with the family. Individual family members continue to respond to the comments, concerns, confrontations of the members of other families in the group. Alternative ways of behaving are suggested and discussed. The individuals are encouraged to consider changes which they can implement in their own families while comparing such possible solutions to those used in the other families.

The final session is intended to be used by the group to summarize the process of consultation. For the purpose of this study the experimental group continued for twelve sessions and consequently used the twelfth session to summarize. However, the sessions beyond the fifth, whether the goal is eight sessions or twelve, are used similarly. They are used to check out descriptions of events, what happens to the individuals involved, and alternate ways of behaving in such events. In addition, the counselors spend considerable group time in making certain that they and the other consultants are understood, that the messages being sent are those which are received, and that the messages being sent are those the sender wishes to go out.

To lead the group into summarizing their experiences in the group and the consequences thereof, some remarks are made such as "This is the last session for the time being. I wonder if we can devote part of it, at least, to a review of what we've been doing? What do you make of what has been going on? What do you think has been accomplished? Are there

things you do differently now from the way you did do such things? Can you be specific?" "What can you use of what you learned here?" These questions would be asked in order to encourage an internalizing of trial activities and to make more immediate a sense of gain. In an effort to help the individuals find the direction most desirable to each in the future, such questions as these might be asked? "What do you anticipate for yourself? How are you going to use what you've learned? Can you think of some situations in which you might try some of the things you've learned?"

Other questions, intended to keep the communication process open and functioning, are asked. For example, "Do you practice talking things over at home within the family? Can you use the same tactics outside your family? What recommendations would you make for other families like yours?"

The final session is thus concluded with a remark to the effect that we would like to hear from someone in the family in six or eight weeks just to know how things are going.

V. RESULTS

This method of family group counseling was subjected to a research design in 1965. An error in the design necessitated the use of a nonparametric statistic, and a direct computation of probability was made. On the basis of this test it would appear that family group consultation is not instrumental in helping individuals move toward more effective behavior.

However, despite the fact that there was no statistically significant difference in the behavior of the groups involved in the study there does seem to be other evidence of change. Perhaps we have not yet hit upon the way to quantify significant change. With the ex-

ception of two persons, all of the individuals involved evidenced greater congruence at the end of the counseling sessions when their scores were matched with experts' scores. All of the movement in whatever amount, was in the direction of congruence. In other words, for all but two of those participating in family counseling there was a decrease in discrepancy between individual self-concepts and the experts' composite score.

In addition, there is empirical evidence to the effect that all but two of the families reported themselves as getting along better than they had previous to family group consultation. The families were asked for a verbal evaluation six months after the last session of consultation. Furthermore, we have been impressed with the obvious difference observable in the physical appearance of the individuals involved. Posture, grooming and facial appearance have changed to such an extent that we have wished that we had taken snapshots of the individuals at the beginning of counseling which would illustrate changes to which statistics may not be responsive.

This method of working with families in groups should be tested again. It seems promising of a way in which families may be helped to function more effectively. In addition, it may provide us with more information about an effectively functioning person. We may be enabled to describe such a person. Should this be possible we may be able, subsequently, to infer from the description, a fully effective group of family members.

In family group consultation, individual family members are helped to identify the difficulty which appears to be limiting their effectiveness and the effectiveness of the family as a unit. Individuals are helped to describe their feelings in typical family encounters which may occur during the sessions. The act of identifying and describing

one's feelings seems to interrupt the limiting behavior which the individual had been using so that he may gain a perspepctive which makes it possible for him to choose alternative, more effective, ways of behaving. When one member of a family begins to choose other behavior, other family members may be encouraged to seek change themselves. On the other hand, change by one may be disturbing to others. In the group these and other reactions to the changing dynamics of the family can be observed and dealt with as part of the consultation process.

The family group milieu provides a real, live arena in which some alternate ways of behaving may be tried. Consultants encourage the generalization of these new behaviors to other situations.

V. CONCLUSION

The need for an external agency to perform the socializing process seems likely to continue. Whether the family will continue to be the primary institution which serves this purpose may be argued. That there will continue to be a need for a laboratory for humanizing the young does not seem open to argument. When the family encounters difficulty in fulfilling its function it may need help. Family group consultation is suggested as one way of responding to this need.